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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *ST*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *ST*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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|---|----------|---------|--------|-------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no                                   | STATE OR | SHEETS  | TOTAL  | INDEPENDENT |
| 35 USC 119 (a-d) conditions<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met | COUNTRY  | DRAWING | CLAIMS | CLAIMS      |
| Verified and<br>Acknowledged  | MT       | 2       | 20     | 3           |
| Examiner's Signature <i>[Signature]</i><br>Initials <i>ST</i>   |          |         |        |             |

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## TITLE

Flexible transmit voice tube

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>770 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____ |
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